

# UNITED STATES DISTRICT COURT

DISTRICT OF

## APPEARANCE

Case Number:

To the Clerk of this court and all parties of record:

Enter my appearance as counsel in this case for

I certify that I am admitted to practice in this court.

Date

Signature

Print Name

Bar Number

Address

City

State

Zip Code

Phone Number

Fax Number

**CERTIFICATE OF SERVICE**

The undersigned hereby certifies that on the 11<sup>th</sup> day of September, 2007, a copy of the foregoing was filed electronically. Notice of this filing will be sent to the following parties by operation of the Court's electronic filing system. Parties may access this filing through the Court's system.

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